

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: METHOD AND DEVICE FOR
MANUFACTURING A STRUCTURED
PACKING CORRUGATION, AND
CORRESPONDING FLUID-TREATMENT
APPARATUS
Attorney Docket Number:: 0503-1004
Request for Early
Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JEAN-CLAUDE
Middle Name::
Family Name:: BEAUVOIS
City of Residence:: CHAMPIGNY SUR MARNE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 4, RUE DES VETERANS

City of Mailing Address:: CHAMPIGNY SUR MARNE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 94500

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: SON HA
Middle Name::
Family Name:: GIANG
City of Residence:: SUCY EN BRIE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 23, PLACE SAINTE BERNADETTE

City of Mailing Address:: SUCY EN BRIE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 94370

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: GILLES
Middle Name::
Family Name:: LEBAIN
City of Residence:: VILLEJUIF
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 4, AVENUE LOUIS BLERIOT

City of Mailing Address:: VILLEJUIF
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 94800

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ETIENNE
Middle Name::
Family Name:: WERLEN
City of Residence:: PARIS
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 85 BOULEVARD PASTEUR

City of Mailing Address:: PARIS
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 75015

Correspondence Information

Correspondence Customer 000466
Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0101805	2/9/01	Yes

Assignment Information

Assignee Name::
Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::